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Fill in this information to idea	ntify your case: Document Pag	of 51 Of 51 White States BankRuptcy Count UNITED STATES BANKRUPTCY COUNT UNITED STATES BANKRUPTCY COUNT UNITED STATES BANKRUPTCY COUNT OF 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
United States Bankruptcy Cour	et four the co	WRUPT CY LINOIS
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Northern District of Illinois	_	INITED SHERN DISTIN
Case number (If known):	Chapter	UNITED SIEN DIST. JUN 16 2017
	Chapter you are filing unde	er: JUN ' CLERK
	☐ Chapter 11	CTEADT
	☐ Chapter 12 ☐ Chapter 13	ALLSKE 2
	Griapter (3	Check if this is an
		JEFFREY P ALLSTEADT, CLERK JEFFREY P ALLSTEADT Check if this is an amended filling
Official Form 101		
	ition for Individual	P****
ordinedry r Ge	ition for individuals	Filing for Bankruptcy 12/
e bankruptcy forms use vou	and Dehtor 1 to refer to a dehter greet	
nt case—and in joint cases, t	these forms use you to ask for information from	married couple may file a bankruptcy case together—called a n both debtors. For example, if a form asks, "Do you own a car
answer would be yes if either	er debtor owns a car. When information is need	n both debtors. For example, if a form asks, "Do you own a car ded about the spouses separately, the form uses <i>Debtor 1</i> and
btor 2 to distinguish between	them. In joint cases, one of the spouses must	led about the spouses separately, the form uses <i>Debtor 1</i> and report information as <i>Debtor 1</i> and the other as <i>Debtor 2</i> . The
as complete and accurate as	s possible. If two married people are filing toget	ther, both are equally responsible for supplying correct
ormation. If more space is ne	eded, attach a separate sheet to this form. On	ther, both are equally responsible for supplying correct the top of any additional pages, write your name and case nur
known). Answer every questi	on.	and case nur
id In Identify Yourself		
	About Debtor 1:	
Your full name		About Debtor 2 (Spouse Only in a Joint Case):
Write the name that is on your		
government-issued nicture	ROSA	
government-issued picture identification (for example.	First name	First name
government-issued picture identification (for example, your driver's license or	First name MARIA	First name
government-issued picture identification (for example, your driver's license or passport).	First name MARIA Middle name	First name Middle name
government-issued picture identification (for example, your driver's license or passport). Bring your picture	First name MARIA Middle name MARQUARDT	
government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting	First name MARIA Middle name	
government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting	First name MARIA Middle name MARQUARDT Last name	Middle name Last name
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government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	First name MARIA Middle name MARQUARDT Last name	Middle name Last name
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government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee. All other names you have used in the last 8	First name MARIA Middle name MARQUARDT Last name Suffix (Sr., Jr., II, III) ROSA First name	Middle name Last name
government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee. All other names you have used in the last 8 years	First name MARIA Middle name MARQUARDT Last name Suffix (Sr., Jr., II, III) ROSA First name MARIA	Middle name Last name Suffix (Sr., Jr., II, III)
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government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee. All other names you have used in the last 8 years Include your married or	First name MARIA Middle name MARQUARDT Last name Suffix (Sr., Jr., II, III) ROSA First name MARIA Middle name ALESI Last name	Last name Suffix (Sr., Jr., II, III) First name Middle name Last name First name
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government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee. All other names you have used in the last 8 years Include your married or maiden names.	First name MARIA Middle name MARQUARDT Last name Suffix (Sr., Jr., II, III) ROSA First name MARIA Middle name ALESI Last name Middle name Last name	Middle name Suffix (Sr., Jr., II, III) First name Middle name Last name First name Middle name
government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee. All other names you have used in the last 8 years Include your married or maiden names. Only the last 4 digits of your Social Security	First name MARIA Middle name MARQUARDT Last name Suffix (Sr., Jr., II, III) ROSA First name MARIA Middle name ALESI Last name Middle name Middle name	Middle name Suffix (Sr., Jr., II, III) First name Middle name Last name First name Last name Last name
government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee. All other names you have used in the last 8 years Include your married or maiden names. Only the last 4 digits of your Social Security number or federal	First name MARIA Middle name MARQUARDT Last name Suffix (Sr., Jr., II, III) ROSA First name MARIA Middle name ALESI Last name Middle name Last name	Middle name Last name Suffix (Sr., Jr., II, III) First name Middle name Last name Middle name Last name XXX - XX -
government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee. All other names you have used in the last 8 years Include your married or maiden names. Only the last 4 digits of your Social Security number or federal individual Taxpayer	First name MARIA Middle name MARQUARDT Last name Suffix (Sr., Jr., II, III) ROSA First name MARIA Middle name ALESI Last name Middle name Last name XXX - xx - 5 1 4 5	Middle name Suffix (Sr., Jr., II, III) First name Middle name Last name First name Last name Last name

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Debtor 1

ROSA

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MARIA Middle Name **MARQUARDT** First Name Case number (# known)

1		About Debtor 1:	
			About Debtor 2 (Spouse Only in a Joint Case):
4.	and Employer Identification Numbers (EIN) you have used in	have not used any business names or EINs.	☐ I have not used any business names or EINs.
	the last 8 years	Business name	Business name
	Include trade names and doing business as names		
	doing business as flatfles	Business name	Business name
		EIN	EIN
			C/N
		EIN Annual Annua	EIN
KRODINOS			EIIA
£	Where you live		
J.	where you nve		If Debtor 2 lives at a different address:
		1022.0.01-	
		1932 S. Clarence Ave. Apt. 2	
			Number Street
		Berwyn IL 60402	
		State ZIP Code	City State ZIP Code
		Cook County	
		•	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number Street	N.
			Number Street
		P.O. Box	P.O. Box
			F.O. BOX
		City State ZIP Code	City State 719 Code
vapenytrok	િંદર દાસારા અંગ પ્રત્યાન કર્યા કરિયાના ભાગ અને સ્થિતિ કર્યા કર્યા કર્યા છે. જે તે કર્યા કર્યા કર્યા કર્યા કર્ય જે તમારા કર્યા		City State ZIP Code
W	hy you are choosing is district to file for	Check one:	жение в в в в в в в в в в в в в в в в в в в
ba	ankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)
			4

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Debtor 1

ROSA MARIA **MARQUARDT**

Case number (if known)_

Part 2:

Tell the Court About Your Bankruptcy Case

7.	The chapter of the Bankruptcy Code you	Check for Ba	one. (For nkruptcy (F	a brief descripti orm 2010)). Als	on of each, see <i>No</i> so, go to the top of	tice Required by 1 page 1 and check	11 U.S.C. § 342(b) for Individuals Filing the appropriate box.
	are choosing to file under		apter 7				•
		☐ Ch	apter 11				
		☐ Ch	apter 12				
		☐ Ch	apter 13				
8.	How you will pay the fee	you sub	irself, you mitting yo	r more details I may pay with	s about now you i n cash, cashier's on your behalf, vo	may pay. Typica check, or money	heck with the clerk's office in your ally, if you are paying the fee y order. If your attorney is y pay with a credit card or check
		☐ I ne Apj	ed to pay	y the fee in ir or Individuals	istaliments . If yo to Pay The Filing	ou choose this of Fee in Installma	ption, sign and attach the ents (Official Form 103A).
		les: pay	than 150 the fee ir	ye may, but is)% of the offic installments)	inot required to, ial poverty line th). If you choose th	waive your fee, a lat applies to you his option, you m	etion only if you are filing for Chapter and may do so only if your income is our family size and you are unable to nust fill out the <i>Application to Have th</i> with your petition.
	Have you filed for bankruptcy within the	☑ No	***************************************				
	last 8 years?	Yes.	District _		When	MM / DD / YYYY	Case number
			District _		When		Case number
			D:			MM / DD / YYYY	
			District			MM / DD / YYYY	Case number
	Are any bankruptcy	☑ No			***************************************		
•	cases pending or being filed by a spouse who is	TYes.	Debtor				Relationship to you
1	not filing this case with you, or by a business partner, or by an affiliate?		District		When	MM / DD / YYYY	Case number, if known
•			Debtor				Dolational in to
			District		When		Relationship to you Case number, if known
						אַרַאַר עט דואואו	
	o you rent your esidence?	No.	Go to line				
		res.	residence	andlord obtaine ?	id an eviction judgn	nent against you a	and do you want to stay in your
				to line 12.			
			[] V ~				Against You (Form 101A) and file it with

Doc 1

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Debtor 1

ROSA

MARIA

MARQUARDT

_	
Case number (if known)	

	THE TOTAL PROPERTY.	Cast Maine	
Part 3:	Report About Any Business	es You Own as a Sole Proprietor	
		outil as a obje rioprietor	

12. Are you a sole proprietor of any full- or part-time business?

A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.

If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.

Name of business, if any	
Number Street	
Number Street	
City	State ZIP Code
Check the appropriate box to des	scribe your business;
Health Care Business (as de	fined in 11 U.S.C. § 101(27A))
Health Care Business (as de Single Asset Real Estate (as	efined in 11 U.S.C. § 101(27A)) defined in 11 U.S.C. § 101(51B))
Check the appropriate box to des Health Care Business (as de Single Asset Real Estate (as Stockbroker (as defined in 11 Commodity Broker (as define	efined in 11 U.S.C. § 101(27A)) defined in 11 U.S.C. § 101(51B)) 1 U.S.C. § 101(53A))

13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?

For a definition of small business debtor, see 11 U.S.C. § 101(51D).

If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).

- No. I am not filing under Chapter 11.
- □ No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.
- Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.

Part 4:

Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention

14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

☑ No ☐ Yes.	What is the hazard?	AND THE PARTY OF T				
	If immediate attention is	s needed, w	hy is it needed?			The state of the s
	Where is the property?	Number	Street			
		City	1 1 2 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	State	ZIP Code	

Doc 1

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Desc Main

Debtor 1

ROSA

MARIA

MARQUARDT

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About	Debtor	1:
-------	--------	----

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

l am not required	to receive a	briefing	abou
credit counseling	because of	:	

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required	to receive a	briefing	about
credit counseling	because of		

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances

rational decisions about finances.

Disability. My physical disability causes me

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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ROSA Debtor 1 MARQUARDT MARIA Case number (if known) Part 6: Answer These Questions for Reporting Purposes 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) 16. What kind of debts do as "incurred by an individual primarily for a personal, family, or household purpose." you have? No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. 17. Are you filing under ☐ No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Do you estimate that after Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and any exempt property is administrative expenses are paid that funds will be available to distribute to unsecured creditors? excluded and M No administrative expenses are paid that funds will be Q Yes available for distribution to unsecured creditors? 18. How many creditors do **2** 1-49 1,000-5,000 25,001-50,000 you estimate that you 50-99 5,001-10,000 50,001-100,000 owe? 100-199 10,001-25,000 ☐ More than 100,000 200-999 19. How much do you \$0-\$50,000 □ \$1,000,001-\$10 million estimate your assets to \$500,000,001-\$1 billion \$50,001-\$100,000 \$10,000,001-\$50 million ☐ \$1,000,000,001-\$10 billion be worth? **100,001-\$500,000** ☐ \$50,000,001-\$100 million \$10,000,000,001-\$50 billion ☐ \$500,001-\$1 million □ \$100,000,001-\$500 million ☐ More than \$50 billion 20. How much do you \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion estimate your liabilities \$50,001-\$100,000 \$10,000,001-\$50 million □ \$1,000,000,001-\$10 billion to be? \$100,001-\$500,000 ☐ \$50,000,001-\$100 million \$10,000,000,001-\$50 billion □ \$500,001-\$1 million □ \$100,000,001-\$500 million ☐ More than \$50 billion Part 7 Sign Below I have examined this petition, and I declare under penalty of perjury that the information provided is true and For you correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Signature of Debtor 1 Signature of Debtor 2 Executed on 06/15/2017 Executed on

MM / DD /YYYY

MM / DD /YYYY

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Debtor 1

ROSA

MARIA

MARQUARDT

aet Name

Case number (if known)

For you if you are filing this bankruptcy without an attorney

If you are represented by an attorney, you do not need to file this page. The law allows you, as an individual, to represent yourself in bankruptcy court, but you should understand that many people find it extremely difficult to represent themselves successfully. Because bankruptcy has long-term financial and legal consequences, you are strongly urged to hire a qualified attorney.

To be successful, you must correctly file and handle your bankruptcy case. The rules are very technical, and a mistake or inaction may affect your rights. For example, your case may be dismissed because you did not file a required document, pay a fee on time, attend a meeting or hearing, or cooperate with the court, case trustee, U.S. trustee, bankruptcy administrator, or audit firm if your case is selected for audit. If that happens, you could lose your right to file another case, or you may lose protections, including the benefit of the automatic stay.

You must list all your property and debts in the schedules that you are required to file with the court. Even if you plan to pay a particular debt outside of your bankruptcy, you must list that debt in your schedules. If you do not list a debt, the debt may not be discharged. If you do not list property or properly claim it as exempt, you may not be able to keep the property. The judge can also deny you a discharge of all your debts if you do something dishonest in your bankruptcy case, such as destroying or hiding property, falsifying records, or lying. Individual bankruptcy cases are randomly audited to determine if debtors have been accurate, truthful, and complete. Bankruptcy fraud is a serious crime; you could be fined and imprisoned.

If you decide to file without an attorney, the court expects you to follow the rules as if you had hired an attorney. The court will not treat you differently because you are filing for yourself. To be successful, you must be familiar with the United States Bankruptcy Code, the Federal Rules of Bankruptcy Procedure, and the local rules of the court in which your case is filed. You must also be familiar with any state exemption laws that apply.

be familiar with any state exemption laws that apply.	this which your case is filed. You must also
Are you aware that filing for bankruptcy is a serious a consequences? No Yes	ction with long-term financial and legal
Are you aware that bankruptcy fraud is a serious criminaccurate or incomplete, you could be fined or imprision. No Yes	e and that if your bankruptcy forms are oned?
Did you pay or agree to pay someone who is not an at No Yes. Name of Person DAVID C. SZERLAG Attach Bankruptcy Petition Preparer's Notice, De	
By signing here, I acknowledge that I understand the ri have read and understood this notice, and I am aware attorney may cause me to lose my rights or property if	that filling a bankruntov case without on
Rosa M Marquardt 3 Signature of Debtor 1	Signature of Debtor 2
Date 06/15/2017 MM / DD / YYYY	Date MM / DD / YYYY
Contact phone <u>(773)</u> 387-7873	Contact phone
Cell phone (773) 742-8380	Cell phone
Email address <u>alesibella bychoo</u> c	Principle address

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Fill in this in	formation to ide	entify your case:	
Debtor 1	ROSA	MARIA	MARQUARDI
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
United States E	Bankruptcy Court fo	r the: Northern District of Illinois	
Case number			
	(If known)		

Check if this is an amended filing

12/15

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Part 1: Summarize Your Assets			
1. Schodule A.D. Dungata (Official)		Your ass Value of w	ets what you own
Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	••••••	\$	
1b. Copy line 62, Total personal property, from Schedule A/B		\$	3,100.00
1c. Copy line 63, Total of all property on Schedule A/B		\$	3,100.00
Part 23 Summarize Your Liabilities			
Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Page 1.	rt 1 of Schedule D	Your liab Amount yo	医克雷氏性动物 医克克氏病 医皮肤炎
 Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F 		\$	
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F		+ \$	20,928.00
	Your total liabilities	\$	20,928.00
Partic: Summarize Your Income and Expenses		L	
Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I		\$	3,622.00
Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J		\$	3,539.00

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Debtor 1

Middle Name

Last Name

		Document	Page 9 of 51	
ROSA	MARIA	MARQUARDT	Case number (# basses)	

Case number (if known)_

Pai	114: Answer These Questions for Administrative and Statistical Records		
6	Are you filing for bankruptcy under Chapters 7, 11, or 13?		
	No. You have nothing to report on this part of the form. Check this box and submit this form to✓ Yes	o the court with your othe	r schedules.
7. \	wasters and reasonable control and the second control and the second and the seco	der komstat et er skalten som er komstat skalten komstat en sen sen komstat en sen de, forsynger, och	addistributura punta estat a propriata esta de depretar estados estados estados estas propriatas en entre el c
Į	Your debts are primarily consumer debts. Consumer debts are those "incurred by an indiv family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes.	idual primarily for a perso 28 U.S.C. § 159.	onal,
{	Your debts are not primarily consumer debts. You have nothing to report on this part of the this form to the court with your other schedules.	e form. Check this box a	nd submit
3. F	From the Statement of Your Current Monthly Income: Copy your total current monthly income	from Official	allikkytheythe (1 med har gheyrada medlik 1 ke one 1 ki 22 lliakhdayanggan, ar har eg segir en darya a
1	Form 122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14.		\$ 5,099.00
	From Part 4 on Schedule E/F, copy the following:	otal claim	
9	Pa. Domestic support obligations (Copy line 6a.)		
91	b. Taxes and certain other debts you owe the government. (Copy line 6b.)		
90	c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	71-71-71-11-11-11-11-11-11-11-11-11-11-1	
90	d. Student loans. (Copy line 6f.)	***************************************	
96	e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)		
9f	f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)		
99	g. Total . Add lines 9a through 9f.	0.00	

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First Name Middle Name Last Name Debtor 2 (Spouse, if filling) First Name Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois Case number		ARQUARDT	MAROL	MARIA	ROSA	D-14 F
Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois Case number al						Jepior i
United States Bankruptcy Court for the: Northern District of Illinois Case number al						Debtor 2
Case number Case number al		Name	Last Name	Middle Name	First Name	Spouse, if filing)
a a				the: Northern District of Illinois	Bankruptcy Court for the	Jnited States Ba
a						Case number
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Official Form 106A/R	amended fil	New york and an address of the Conference of the				
				A /D	Earm 1064/	Official I
Official Form 100AVB				₹ / D	FUIII IUOA	Onicial i

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

No. Go to Part 2.			
Yes. Where is the property?			
Street address, if available, or other description	What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the entire property?	ed claims on Schedule E ms Secured by Property
	☐ Land	e contract property:	portion you own?
	☐ Investment property	3	\$
City State ZIP Code	☐ Timeshare ☐ Other	Describe the nature of interest (such as fee the entireties, or a life	simple, tenancy by
	Who has an interest in the property? Check one.		
	Debtor 1 only		
County	Debtor 2 only	Check if this is co	
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	(see instructions)	mmunity property
	Other information you wish to add about this it	em such as local	
	property identification number:		
ou own or have more than one, list here:	What is the property? Check all that apply.	Do not deduct secured cla	
2. Street address, if available or other description	What is the property? Check all that apply. Single-family home	Do not deduct secured cla the amount of any secured Creditors Who Have Clain	claims on Schedule D
	What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	the amount of any secured	d claims on Schedule D as Secured by Property
,	What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land	the amount of any secured Creditors Who Have Clain Current value of the	d claims on Schedule D as Secured by Property Current value of the
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Street address, if available, or other description City State ZIP Code	What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other	the amount of any secured Creditors Who Have Claim Current value of the entire property? \$ Describe the nature o	d claims on Schedule Das Secured by Property Current value of the portion you own? \$
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ebtor 1	ROSA	MARIA	MARGI	JAKUI	Page 11	Casa number		
	First Name	Middle Name	Last Name			Case number	(# known)	
				What is the pro		that apply.	Do not deduct secured	claims or exemptions. Put
1.3.				Single-family			the amount of any secu	red claims on Schedule D
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					d or mobile home		entire property?	portion you own?
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	A.:			Investment pr	roperty			
	City	State		Timeshare			Describe the nature	e of your ownership e simple, tenancy by
			į,	Other			the entireties, or a li	ife estate), if known.
			V	Vho has an inte	erest in the prop	perty? Check one		
	County			Debtor 1 only				
	ou.ny			Debtor 2 only				
				Debtor 1 and D				ommunity property
				At least one of	the debtors and	another	(see instructions)	
			C	Other information	on you wish to	add about this i	tem, such as local	
			ŗ					
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ou h	ave attached for P	art 1. Write that	t number her	e	om Part 1, mer	uding any entri	es for pages	\$
VOSVVIIV	Describe You		ble interest in	any vehicles	whather they a	re registered o	mak2 look do annu ki ki	· · · · · · · · · · · · · · · · · · ·
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Page 12 of 51 **ROSA** MARIA Debtor 1 Case number (if known) First Name Middle Name

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IVIO	del:	Debtor 1 only	the amount of any secur	ed claims on Schedule D:
Yea		Debtor 2 only	Creditors Who Have Cla	ims Secured by Property.
		Debtor 1 and Debtor 2 only	Current value of the	Current value of the
App	proximate mileage:	At least one of the debtors and another	entire property?	portion you own?
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	- A C	Check if this is community property (see	\$	\$
		instructions)		
Mal	ke:	Who has an interest in the property? Check one.	Do not deduct secured cl	aims or exemptions. Put
Mod	del:	Debtor 1 only	the amount of any secure	ed claims on Schedule D:
Yea		Debtor 2 only	Creditors Who Have Clai	ms Secured by Property.
		Debtor 1 and Debtor 2 only	Current value of the	Current value of th
App	proximate mileage:	At least one of the debtors and another	entire property?	portion you own?
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5.

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Debtor 1

ROSA MARIA Document MARQUARDT

Case number (if known)_

Part 3:

Describe Your Personal and Household Items

Do you own or have any	legal or equitable interest in any of the following items?	portion y Do not ded	ralue of the ou own? uct secured claims ons.
6. Household goods an	d furnishings		
Examples: Major appli	ances, furniture, linens, china, kitchenware		
□ No			
Yes. Describe	Various Furniture and Fixtures	\$	500.00
7. Electronics		***************************************	
collections;	and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music electronic devices including cell phones, cameras, media players, games		
☐ No ☑ Yes. Describe	Television and computer		500.00
		\$	300.00
8. Collectibles of value	de to the control of		
stamp, coin	nd figurines; paintings, prints, or other artwork; books, pictures, or other art objects; s, or baseball card collections; other collections, memorabilia, collectibles		
Yes. Describe		\$	
0 E			
9. Equipment for sports			
and kayaks	tographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes ; carpentry tools; musical instruments		
☑ No			
Yes. Describe	•		
		\$	
10. Firearms		and an arrange of a series of	
☑ No	s, shotguns, ammunition, and related equipment		
Yes. Describe		\$	727044
11. Clothes			
Examples: Everyday ck	othes, furs, leather coats, designer wear, shoes, accessories		
	Various everyday clothes, shoes, accessories	\$	500.00
12. Jewelry			
•	welry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems,		
☐ No			
Yes. Describe	Wedding ring, everyday jewelry, watches	\$	1,000.00
13. Non-farm animals	The second section of the section of the section of the second section of the section of t		
Examples: Dogs, cats, b	pirds, horses		
☑ No			
Yes. Describe		\$	
14. Any other personal and	d household items you did not already list, including any health aids you did not list		
☑ No			
Yes. Give specific information		\$	

 Add the dollar value of for Part 3. Write that no 	all of your entries from Part 3, including any entries for pages you have attached	. \$	2,500.00

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Debtor 1

ROSA First Name

MARIA Middle Name

MARQDARUMent

Case number (# known)

Part 4:

Describe Your Financial Assets

	/ legal or equitable interest in		portion ye	uct secured claims
16. Cash Examples: Money you	have in your wallet, in your ho	ne, in a safe deposit box, and on hand when you file your petition		
☐ No				
☑ Yes		Cash:	\$	100.00
and other s	savings, or other financial accor similar institutions. If you have n	unts; certificates of deposit; shares in credit unions, brokerage hous nultiple accounts with the same institution, list each.	es,	
☐ No ☑ Yes		Institution name:		
	17.1. Checking account:	JPMorgan Chase Bank, N.A. (Joint Account)	\$	500.00
	17.2. Checking account:		\$	
	17.3. Savings account:		\$	
	17.4. Savings account:		\$	
	17.5. Certificates of deposit:		\$	
	17.6. Other financial account:		•	
	17.7. Other financial account:			
	17.8. Other financial account:		Y	***************************************
	17.9. Other financial account:		<u> </u>	
	71.5. Strict Walloug decount		\$ <u></u>	
	or publicly traded stocks investment accounts with broke Institution or issuer name:	erage firms, money market accounts	a	
	***************************************		\$ \$	
			\$ \$	
19. Non-publicly traded s an LLC, partnership, a No Yes. Give specific information about them	and joint venture Name of entity:	rated and unincorporated businesses, including an interest in $\frac{\% \text{ of ownership:}}{0\%}$	\$	
		0% %	φ \$	

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Desc Main

Debtor 1

ROSA

MARIA Middle Name MARQUARDT MARQUARDT

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Case number (# known)_____

	ents are those you co	ecks, cashiers' checks, promissory notes, and money orders. annot transfer to someone by signing or delivering them.	
☑ No			
Yes. Give specific information about	Issuer name:		
them			\$
			\$
			\$
Retirement or pension	accounts		
Examples: Interests in IF		101(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans	
☑ No			
Yes. List each account separately.	Type of account:	Institution name:	
	401(k) or similar plan:		\$
	Pension plan:		\$
	IRA:		
	Retirement account:		\$
	Keogh:		\$
	Additional account:		\$
	Additional account:		\$
	Additional account.		\$
		nade so that you may continue continue or use from a service	
Your share of all unused Examples: Agreements wo companies, or others No Yes	deposits you have m with landlords, prepai	nade so that you may continue service or use from a company d rent, public utilities (electric, gas, water), telecommunications stitution name or individual:	
Your share of all unused Examples: Agreements we companies, or others No Yes	deposits you have rr vith landlords, prepai Ins	d rent, public utilities (electric, gas, water), telecommunications	\$
Your share of all unused Examples: Agreements we companies, or others No Yes	deposits you have m vith landlords, prepai Ins Electric:	d rent, public utilities (electric, gas, water), telecommunications	\$
Your share of all unused Examples: Agreements we companies, or others No Yes	deposits you have month landlords, prepailing lines Electric: Gas: Heating oil:	d rent, public utilities (electric, gas, water), telecommunications	\$ \$
Your share of all unused Examples: Agreements we companies, or others No Yes	deposits you have month landlords, prepailing lines Electric: Gas: Heating oil:	d rent, public utilities (electric, gas, water), telecommunications	\$\$ \$\$
Your share of all unused Examples: Agreements we companies, or others No Yes	deposits you have movith landlords, prepailing lines. Electric: Gas: Heating oil: Security deposit on ren	d rent, public utilities (electric, gas, water), telecommunications	\$\$ \$\$
Examples: Agreements we companies, or others No Yes	deposits you have myith landlords, prepaidents: Electric: Gas: Heating oil: Security deposit on renterpaid rent: Telephone:	d rent, public utilities (electric, gas, water), telecommunications	\$\$ \$\$ \$\$
Your share of all unused Examples: Agreements we companies, or others No Yes	deposits you have movith landlords, prepail rent: Telephone: Water: Rented furniture:	d rent, public utilities (electric, gas, water), telecommunications	\$\$ \$\$ \$\$
Your share of all unused Examples: Agreements we companies, or others No Yes	deposits you have myith landlords, prepaidents: Electric: Gas: Heating oil: Security deposit on renterpaid rent: Telephone:	d rent, public utilities (electric, gas, water), telecommunications	\$\$ \$\$ \$\$ \$\$ \$\$
Your share of all unused Examples: Agreements we companies, or others No Yes	deposits you have movith landlords, prepail rent: Telephone: Water: Rented furniture:	d rent, public utilities (electric, gas, water), telecommunications stitution name or individual: tal unit:	\$\$ \$\$ \$\$ \$\$ \$\$
Your share of all unused Examples: Agreements we companies, or others No Yes	deposits you have movith landlords, prepail landlords, prepail landlords, prepail landlords, prepail landlords, prepail landlords, prepail landlords, land	d rent, public utilities (electric, gas, water), telecommunications	\$\$ \$\$ \$\$ \$\$ \$\$
Your share of all unused Examples: Agreements we companies, or others No Yes	deposits you have myith landlords, prepail rent: Telephone: Water: Rented furniture: Other:	d rent, public utilities (electric, gas, water), telecommunications stitution name or individual: tal unit: f money to you, either for life or for a number of years)	\$\$ \$\$ \$\$ \$\$ \$\$
Your share of all unused Examples: Agreements we companies, or others No Yes	deposits you have movith landlords, prepail landlords, prepail landlords, prepail landlords, prepail landlords, prepail landlords, prepail landlords, land	d rent, public utilities (electric, gas, water), telecommunications stitution name or individual: tal unit: f money to you, either for life or for a number of years)	\$\$ \$\$ \$\$ \$\$ \$\$

Case 17-18308 Doc 1 Filed 06/16/17 Entered 06/16/17 12:06:16 Desc Main Page 16 of 51 **ROSA MARIA** Debtor 1 Case number (if known Middle Name 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ☑ No ☐ Yes Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ☑ No Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements 2 No ☐ Yes. Give specific information about them.... \$ 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor ticenses, professional licenses M No Yes. Give specific information about them.... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you **Ø** No ☐ Yes. Give specific information Federal: about them, including whether you already filed the returns State: and the tax years. Local: 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement M NA

•	NG				
	Yes.	Give specific information	and a shall have an extra country (AP) the Price fundation and only (AP) the Price fundation and the shall be seen as a shall be supported in the contract of the second on the shall be seen as a shall be seen as a shall be supported in the second of the		
				Alimony:	\$
				Maintenance;	\$
				Support:	\$
				Divorce settlement:	\$
				Property settlement	\$

30. Other amounts someone owes you

Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

Ø	No	
	Yes. Give specific information	

Case 17-18308 Doc 1 Filed 06/16/17 Entered 06/16/17 12:06:16 Document Page 17 of 51 ROSA MARQUARDT MARIA Debtor 1 Case number (# know First Name Middle Name 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance ✓ No Yes. Name the insurance company Company name: Beneficiary: Surrender or refund value: of each policy and list its value... 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ☑ No Yes. Give specific information..... 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue M No ☐ Yes. Describe each claim..... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims Mo No Yes. Describe each claim..... 35. Any financial assets you did not already list 2 No Yes. Give specific information..... 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here 600,00 Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. Yes. Go to line 38. Current value of the portion you own? Do not deduct secured claims or exemptions. 38. Accounts receivable or commissions you already earned ☐ No ☐ Yes. Describe.....

Yes. Describe.....

☐ No

39. Office equipment, furnishings, and supplies

Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices

Case 17-18308 Doc 1 Filed 06/16/17 Entered 06/16/17 12:06:16 Desc Main Page 18 of 51 MARCPARUMent ROSA MARIA Debtor 1 Case number of known Middle Name 40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade ☐ No Yes. Describe...... 41. Inventory ☐ No Yes. Describe...... 42. Interests in partnerships or joint ventures ☐ No ☐ Yes. Describe...... Name of entity: % of ownership: % 43. Customer lists, mailing lists, or other compilations O No Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))? Yes. Describe..... 44. Any business-related property you did not already list ☐ No ☐ Yes. Give specific information 45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. Part 6: if you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? Mo. Go to Part 7. Yes, Go to line 47. Current value of the portion you own? Do not deduct secured claims or exemptions. 47. Farm animals

☐ Yes.....

☐ No

Examples: Livestock, poultry, farm-raised fish

ROSA MARIA Debtor 1 Case number (if known) First Name Middle Name 48. Crops—either growing or harvested ☐ No Yes. Give specific information..... 49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade ☐ Yes..... 50. Farm and fishing supplies, chemicals, and feed ☐ No ☐ Yes..... 51. Any farm- and commercial fishing-related property you did not already list ☐ No ☐ Yes. Give specific information...... 52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here Part 7a Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☑ No ☐ Yes. Give specific information..... 54. Add the dollar value of all of your entries from Part 7. Write that number here Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 56. Part 2: Total vehicles, line 5 2,500.00 57. Part 3: Total personal and household items, line 15 600.00 58. Part 4: Total financial assets, line 36 59. Part 5: Total business-related property, line 45 60. Part 6: Total farm- and fishing-related property, line 52 61. Part 7: Total other property not listed, line 54 3,100.00 Copy personal property total → 62. Total personal property. Add lines 56 through 61. 3,100,00 3.100.00 63. Total of all property on Schedule A/B. Add line 55 + line 62.

Case 17-18308

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	Case 17-18	3308 _{"AI} Dog _E FerEi	ed 06/16/17 TEnter	ed 06/16/17 12:06:16 20 of 51	Desc Main
Fill in this	information to id		ocument Page 2		
Debtor 1	ROSA Pirst Name	MARIA Middle Name	MARQUARDT Last Name		
, , ,	ng) First Name	Middle Name or the: Northern District of III	Last Name		
Case number (If known)	. ,	or me. Notifier i District of m	inois		Check if this is an amended filing
Official	Form 1060	<u>C</u>			
Sche	dule C:	The Proper	ty You Clair	n as Exempt	04/16
Be as compl Using the pro	ete and accurate a	s possible. If two married p	eople are filing together, both Official Form 106A/B) as your	n are equally responsible for supp	lying correct information.

space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify (the Property	You Claim	as Exemp
Part 1:	Identify (the Property	You Claim	as Exemp

	Which set of exemptions are you claiming? Check one only, even if your spouse is filling with you. ✓ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) ✓ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
2.	For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Schedule A/B	on of the property and line on that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption	
·		Copy the value from Schedule A/B	Check only one box for each exemption.		
Brief description:	Furniture & Fixtures	\$ <u>500.00</u>	☑ \$ <u>500.00</u>	735-5/12-1001(b)	
Line from Schedule A/B:	6		☐ 100% of fair market value, up to any applicable statutory limit		
Brief description:	T.V. & Computer	\$ <u>500.00</u>	Ø \$ 500.00	735-5/12-1001(b)	
Line from Schedule A/B:	7		100% of fair market value, up to any applicable statutory limit		
Brief description:	Various Clothing	\$ <u>500.00</u>	Ø \$ <u>500.00</u>	735-5/12-1001(a)	
Line from Schedule A/B:	11		100% of fair market value, up to any applicable statutory limit	The later to the state of the s	

3.	Are you claiming a homestead exemption of more than \$160,375?
	(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)
	☑ No
	Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

N	u	
×7.		

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ROSA

Debtor 1

Part 2: **Additional Page**

Brief descripti on Schedule	ion of the property and line VB that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemptio	
A : s		Copy the value from Schedule A/B	Check only one box for each exemption		
Brief description: Line from	Jewelry & Watches 12	\$1,000.00	☑ \$1,000.00	735-5/12-1001(b)	
Schedule A/B:	! &		any applicable statutory limit		
Brief description:	Cash on Hand	\$ 100.00	■ \$100.00	735-5/12-1001(b)	
Line from Schedule A/B:	16		☐ 100% of fair market value, up to any applicable statutory limit		
Brief description:	Cash in Checking	\$500.00	5 \$ 500.00	735-5/12-1001(b)	
Line from Schedule A/B:	17		☐ 100% of fair market value, up to any applicable statutory limit		
Brief description:	West was the same and the same	\$	<u></u> \$		
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	***************************************	
Brief description:		\$	0 \$		
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit		
Brief description:		\$	\$		
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit		
Brief description:		\$	- s		
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit		
Brief description:		\$	<u>s</u>		
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit		
Brief description:		\$	<u> </u>		
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit		
Brief description:		\$			
Line from Schedule A/B;			100% of fair market value, up to any applicable statutory limit		
Brief description:		\$	<u> </u>		
Line from Schedule A/B:			100% of fair market value, up to any applicable statutory limit		
Brief description:		\$			
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit		

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Fill in this information to identify your o	case:				
DODIO!	ARIA	MARQUARDT Last Name			
Debtor 2	CO PARTO	Last Name			
(Spouse, if filing) First Name Midd	die Name	Last Name			
United States Bankruptcy Court for the: Northe	m District of Illinois				
Case number(f known)					
(I A I MAI)					if this is ar led filing
Official Form 106D					
Schedule D: Credito	rs Who H	ave Claims Sec	ured by Pro	perty	12/15
Be as complete and accurate as possible information. If more space is needed, considerable additional pages, write your name and of the accurate as possible information below. Do any creditors have claims secured No. Check this box and submit this formation below.	opy the Additional case number (if known better the court of the court with the c	Page, fill it out, number the entrown). ?	ies, and attach it to th	s form. On the top of	t fany
Part 13: List All Secured Claims					
List all secured claims. If a creditor has for each claim. If more than one creditor As much as possible, list the claims in all	has a particular cla	im, list the other creditors in Part 2	tely Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecure portion
1	Describe the pr	operty that secures the claim:			If any
Creditor's Name	Describe trie pr	operty that secures the ciaim;	<u> </u>	<u> </u>	\$
Number Street					
Number Street	As of the date v	ou file, the claim is: Check all that a			
	Contingent	ou ino, the claim is. Check an ulat a	ppiy.		
City State ZIP Code	Unliquidated				
	☐ Disputed				
Who owes the debt? Check one.	Nature of lien. C				
Debtor 1 only Debtor 2 only	An agreement car loan)	l you made (such as mortgage or secul	red		
Debtor 1 and Debtor 2 only		(such as tax lien, mechanic's lien)			
At least one of the debtors and another	Judgment lien				
Check if this claim relates to a		ng a right to offset)			
community debt					
Date debt was incurred	Last 4 digits of a	ccount number			
Experience of the second state of the second s	Describe the pro	perty that secures the claim:	ania tirimo retenia nenenativo et misso propositivo e e e e e e e e e e e e e e e e e e e	rationi descenda esperante esta de la companya de l S	
Creditor's Name		party man occurred are crann.	**	3)
Number Street					
	As of the date yo	ou file, the claim is: Check all that ap	oolv.		
	- Contingent		F3.		
City State ZIP Code	Unliquidated				
	Disputed				
	Nature of lien. Ch				
Who owes the debt? Check one.	ma .		ed		
Who owes the debt? Check one. Debtor 1 only	An agreement	you made (such as mortgage or secure			
Who owes the debt? Check one. Debtor 1 only Debtor 2 only	car loan)				
Who owes the debt? Check one. Debtor 1 only Debtor 2 only	car loan)	such as tax lien, mechanic's lien)			
Nho owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a	car loan) Statutory lien (such as tax lien, mechanic's lien)			
Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	car loan) Statutory lien (such as tax lien, mechanic's lien) from a lawsuit g a right to offset)	··		

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Fill in this in	formation to id	entify your case:		
Debtor 1	ROSA	MARIA	MARQU	ARDT
- 	First Name	Middle Name	Last Name	
Debtor 2			~	
(Spouse, if filing)	First Name	Middle Name	Lasi Name	
United States I	Bankruptcy Court fo	or the: Northern District of Illinois		3
Case number (if known)				
(ii Kilowii)				

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

Part 1:	List All of Your PRIORITY Unsecur	ed Claims			
PA No List a each o nonpri unsec	all of your priority unsecured claims. If a cr claim listed, identify what type of claim it is. If iority amounts. As much as possible, list the cured claims, fill out the Continuation Page of	reditor has more than one priority unsecured claim, list to a claim has both priority and nonpriority amounts, list the claims in alphabetical order according to the creditor's report 1. If more than one creditor holds a particular claim instructions for this form in the instruction booklet.)	nat claim here ar name. If you hav	nd show both e more than to	priority and wo priority
2.1	ty Creditor's Name	Last 4 digits of account number	\$	amount	amount
Numb	per Street	When was the debt incurred? As of the date you file, the claim is: Check all that appl	y .		
	State ZIP Code incurred the debt? Check one. Debtor 1 only	Contingent Unliquidated Disputed			
	Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt	Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government			
	e claim subject to offset?	Claims for death or personal injury while you were intoxicated Other. Specify	-		
2.2 Priority	ty Creditor's Name	Last 4 digits of account number When was the debt incurred?	\$	**************************************	egor e esperante de companya de constructues de constructues de constructues de constructues de la constructue
Numb	ler Street	As of the date you file, the claim is: Check all that appl	y .		
	State ZIP Code Incurred the debt? Check one.	Unliquidated Disputed			
□ D □ D	Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government			
□ c	at least one of the debtors and another Check if this claim is for a community debt	Claims for death or personal injury while you were intoxicated			
is the	- -	Other. Specify	-		The second secon

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Debtor 1

Part 2:

List All of Your NONPRIORITY Unsecured Claims

3544635	X82XXXXXXX					
3.	Do any creditors have nonpriority u					
	No. You have nothing to report in to Yes	his part. Su	ıbmit this form to t	he court with your other schedules.		
1 - 1		Paranakan		Naka kasa basa ba katena sa basa		Applicate the following the first
4.	List all of your nonpriority unsecure	d claims i	n the alphabetica	order of the creditor who holds	each claim. If a creditor ha	s more than one
	nonpriority unsecured claim, list the cre included in Part 1. If more than one cre	editor holds	rately for each clai a particular claim,	m. For each claim listed, identify wi , list the other creditors in Part 3.If v	hat type of claim it is. Do no you have more than three n	ot list claims already
	claims fill out the Continuation Page of	Part 2.				
	_					Total claim
4.1	Capital One Services, LLC			Last 4 digits of account number	3 3 0 6	e e se como de mario ambigio del perior de la colonidade del
	Nonpriority Creditor's Name			Last 4 digits of account number		\$3,273.00
	P.O. Box 30285			When was the debt incurred?	01/01/2015	
	Number Street Salt Lake City	UT	84130	_		
	City	State	ZIP Code	As of the date you file, the clain	is: Check all that apply.	
				Contingent		
	Who incurred the debt? Check one.			Unliquidated		
	Debtor 1 only			O Disputed		
	Debtor 2 only Debtor 1 and Debtor 2 only			T CHOUDDIONES		
	At least one of the debtors and another			Type of NONPRIORITY unsect	ured claim:	:
				Student loansObligations arising out of a sepa		:
	Check if this claim is for a commu	nity debt		that you did not report as priority	ration agreement or divorce claims	
	Is the claim subject to offset?			Debts to pension or profit-sharin	g plans, and other similar debts	\$
	☐ Yes			Other. Specify Credit Card	W-1	
	Bergi kangangan kangga kangga dangga kangga pangga pangga kangga kangga kangga pangga pangga bangga kangga kang			and the second of the control of the	en Colombia de Colombia de Colombia, la region de las superiories de Colombia	
1.2	Chase Bank USA, N.A.			Last 4 digits of account number		\$ 1,869.00
	Nonpriority Creditor's Name			When was the debt incurred?	01/01/2015	:
	200 White Clay Center Drive			-		
	Newark	NJ	19711	As of the date you file, the claim	is: Check all that apply.	i
	City	State	ZIP Code	Contingent		
	Who incurred the debt? Check one.			☐ Unliquidated		
	Debtor 1 only			☐ Disputed		
	Debtor 2 only Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecu	rad claim:	
	At least one of the debtors and another			Student loans	a ou oidaii,	•
				Obligations arising out of a separ	ation agreement or divorce	
	☐ Check if this claim is for a commu	nity debt		that you did not report as priority	claims	
	Is the claim subject to offset?			Debts to pension or profit-sharing Other, Specify Credit Card	plans, and other similar debts	
	Yes			Color. Opedity Street Saire		
3	NMS COOKED DETERMENT OF THE PROPERTY OF THE PR	20504 (A VIII ALO INVINCIONI MA	ettavi (and tig play fastlatikatikatikatikati petaan kaspaysii ny abbatlatika		ой манедамитер в кумперт (Андамия Снойной Андамия имуются (Андамия) «Снойной Андамия)	
	Comenity Bank, Bankruptcy Do Nonpriority Creditor's Name	ept.	Po-MANA III	Last 4 digits of account number	<u>3 2 9 7</u>	s 376.00
	P.O. Box 182125			When was the debt incurred?	01/01/2015	Ψ
	Number Street					:
	Columbus	OH	43218	As of the date you file, the claim	is: Check all that apoly	
	-	State	ZIP Code	☐ Contingent	от от от от от орру	:
	Who incurred the debt? Check one.			Unliquidated		:
	Debtor 1 only Debtor 2 only			☐ Disputed		:
	Debtor 1 and Debtor 2 only			T		
	At least one of the debtors and another			Type of NONPRIORITY unsecu	red claim;	
	Check if this claim is for a commun	ity debt		Student loansObligations arising out of a separa	ation annual and the	
	Is the claim subject to offset?	•		that you did not report as priority of	daims	
	□ No			Debts to pension or profit-sharing	plans, and other similar debts	
	Yes			Other. Specify Credit Card	- Carson's	
						1

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Debtor 1

ROSA MARIA MARQUAROUMent

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2000			
-	•		1
			•
Direct Contract Cont		Street,	м
3.5			

Your NONPRIORITY Unsecured Claims — Continuation Page

	N. A.M.A. (1942 N. 2014 N. 40		
je, number th	em beginning wit	h 4.4, followed by 4.5, and so forth.	Total claim
		Last 4 digits of account number 1 4 9 7	\$ 2,800.0
		When was the debt incurred? 01/01/2015	
UT	84130	As of the date you file, the claim is: Check all that apply.	
State	ZIP Code	Contingent Unliquidated	
10.		Disputed	
		Type of NONPRIORITY unsecured claim:	
nother		Student loans	
•		 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
minum, aco.		Debts to pension or profit-sharing plans, and other similar debts Other Specify Credit Card	
		a Oner. Specify Strong Strong	
Taking kulop Tajanka Kajana wa Kikaji ya Jajak da 1982 Fizi Zajak			1.00 Page 10 11 11 10 10 10 10 10 10 10 10 10 10
Center		Last 4 digits of account number 8 5 5 1	\$85.0
		When was the debt incurred? 04/28/2016	
WI	53201	As of the date you file, the claim is: Check all that apply.	
State	ZIP Code	Contingent	
ie.		Disputed	
		Type of NONDBIODITY unpopured plains	
nother		Obligations arising out of a separation agreement or divorce that	
mmunity debt		Debts to pension or profit-sharing plans, and other similar debts	
		☑ Other. Specify Medical Bill - Daughter	
Cantar	erke ferkule (V. malenia) e filozooloogie (d. marii end ditionale endoeste endoeste endoeste endoeste endoeste	Last 4 digits of account number 0 0 1 1	\$529.0
Center			
WI	53201		
	ar own	☐ Contingent☐ Unliquidated	
ie.		☐ Disputed	
		Type of NONPRIORITY unsecured claim:	
nother		Obligations arising out of a separation agreement or divorce that	
mmunity debt		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
mmunity debt		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Medical Bill - Daughter	
	UT State ne. Center WI State ne. Center Center	UT 84130 State ZIP Code ne. Center WI 53201 State ZIP Code ne. Center WI 53201 State ZIP Code ne.	When was the debt incurred? State ZiP Code Contingent Unliquidated Disputed

Debtor 1

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Your NONPRIORITY Unsecured Claims — Continuation Page

Loyola University Med	ical Center		Last 4 digits of account number 0 0 2 7	s1
Nonpriority Creditor's Name P.O. Box 3021			When was the debt incurred? 10/19/2015	***************************************
Number Street Milwaukee	WI	53201	As of the date you file, the claim is: Check all that apply.	
City Who incurred the debt? Chee Debtor 1 only	State ck one.	ZIP Code	☐ Contingent ☐ Unliquidated ☐ Disputed	
Debtor 2 only Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:	
At least one of the debtors a	nd another		Student loansObligations arising out of a separation agreement or divorce that	
☐ Check if this claim is for Is the claim subject to offset ☐ No ☐ Yes	-		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts other. Specify Medical Bill - Daughter	
Loyola University Medi	cal Center	AMY PARTIES SERVICE AND PROPERTY OF SECURITY SERVICES AND	Last 4 digits of account number $0\ 0\ 2\ 9$	riseenas en
Nonpriority Creditor's Name P.O. Box 3021	cai Centei		When was the debt incurred? 01/01/2015	Φ
Number Street Milwaukee	WI	53201	As of the date you file, the claim is: Check all that apply.	
City	State	ZIP Code	Contingent	
Who incurred the debt? Chec	k one.		☐ Unliquidated ☐ Disputed	
Debtor 1 only				
Debtor 2 only Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:	
At least one of the debtors an			 Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Check if this claim is for a s the claim subject to offset	-		Debts to pension or profit-sharing plans, and other similar debts Other. Specify Medical Bill	
☐ No ☐ Yes			Storic Specify Woulder Sin	
oyola University Medic		l de l'altre d'hard de me la ser a ser quant fre a amende per antique solven de servición de servición per describe	Last 4 digits of account number 2 1 9 6	_{\$} 3,03
coyola Offiversity Medic conpriority Creditor's Name P.O. Box 3021	ai Center		When was the debt incurred? 08/29/2016	
umber Street //ilwaukee	WI	53201	As of the date you file, the claim is: Check all that apply.	
ity	State	ZIP Code	Contingent	
Vho incurred the debt? Check	cone.		☐ Unliquidated ☐ Disputed	
Debtor 1 only			<i></i>	
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only At least one of the debtors and	d another		Student loansObligations arising out of a separation agreement or divorce that	
Check if this claim is for a	·=		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
the claim subject to offset?			Other. Specify Medical Bills	

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Debtor 1

ROSA First Name

MARIA

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Case number (# known)

Part 2:

Your NONPRIORITY Unsecured Claims — Continuation Page

Loyola University Medica	al Center		Last 4 digits of account number 2 5 0 0	\$_8,606.0
Nonpriority Creditor's Name P.O. Box 3021			When was the debt incurred? 02/24/2017	▼ MMMMMMM
Number Street Milwaukee	WI	53201	As of the date you file, the claim is: Check all that apply.	
City	VVI State	ZIP Code	Contingent	
148 1 115 1 1 10 01			☐ Unliquidated	
Who incurred the debt? Check	one.		☐ Disputed	
Debtor 1 only Debtor 2 only			Type of NONDBIODITY uppersued electric	
Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:	
At least one of the debtors and	another		Student loansObligations arising out of a separation agreement or divorce that	
Check if this claim is for a	community debi		you did not report as priority claims	
Is the claim subject to offset?		•	Debts to pension or profit-sharing plans, and other similar debts	
No			☑ Other, Specify Medical Bills - son	
☐ Yes				
જારુંથી કરિયાના કેટલી અને અને અને કરિયાના સામે કેટલી અને કરીએ પ્રાથમિક કરવામાં દુર્વાના વર્ષો કરિયાના અને કરાવ ત્રાંતિ કરિયાના કર્યા કરિયાના કરિયાના કરિયાના કરિયાના કરિયાના કરિયાના કરિયાના કરિયાના કરિયાના અને કરિયાના કરિય	- Period a Marenton e Period a marina de	DDD THROUGH I DANNES O PERNOS PROPORTINA PERSONA E EXPENSION PERSONAL PROPORTION (CO.	\$\\delta\$\$\text{\$\tex{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\	STALKAROPES KETORO DESSOR YANGSSOR ARSINE
Pediatrix Medical Center			Last 4 digits of account number 6 2 5 4	<u>\$116.0</u>
Nonpriority Creditor's Name			When was the debt incurred? 01/02/2015	
P.O. Box 88087			When was the debt incurred? 01/02/2015	
Number Street Chicago	IL	60680	As of the date you file, the claim is: Check all that apply.	
City	State	ZIP Code	Contingent	
Marie to a second district to the Control of the Co			Unliquidated	
Who incurred the debt? Check	one.		☐ Disputed	
Debtor 1 only Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only				
At least one of the debtors and	another		Student loansObligations arising out of a separation agreement or divorce that	
Check if this claim is for a c	community debt		you did not report as priority claims	
	onmunity dest		Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?			☑ Other. Specify Medical Bill	
Yes				
	dan bir bir bir barangan di Apononya paga-papan sangan barang	et sellekti bleeks-et selleksiiksissistassista epiinka pysyksyksyksyksyksyksyks		market arment ferjanskyd tradigionelle som betydente
Padiatriy Madical Cantan			Last 4 digits of account number 6 2 5 4	_{\$} 108.0
Pediatrix Medical Center Nonpriority Creditor's Name		······································	••••••	
P.O. Box 88087			When was the debt incurred? 02/25/2017	
Number Street	5 £	00000	As of the date you file, the claim is: Check all that apply.	
Chicago	IL State	60680 ZIP Code		
	State	AN OOR	Contingent Unliquidated	
Who incurred the debt? Check of	one.		☐ Disputed	
Debtor 1 only				
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only At least one of the debtors and a	another		Student loans	
			Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
☐ Check If this claim is for a c	ommunity debt		Debts to pension or profit-sharing plans, and other similar debts	
is the claim subject to offset?			☑ Other, Specify Medical Bill	
☐ No			· · · · · · · · · · · · · · · · · · ·	

Doc 1

Filed 06/16/17

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For

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Debtor 1

ROSA

MARIA

MARQ DANNIMENT

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Part 3:

List Others to Be Notified About a Debt That You Already Listed

Client Services, Inc.			On which entry in Part 1 or Part 2 did you list the original creditor?
Name			
3451 Harry S. Truman	Blvd.		Line 2 of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street			Part 2: Creditors with Nonpriority Unsecured Claim
St. Charles	MO	63301	Last 4 digits of account number 2 1 7 6
City	State	ZIP Code	
Professional Bureau of	Coll. of Ma	aryland, Inc.	On which entry in Part 1 or Part 2 did you list the original creditor?
Name	***************************************		•
P.O. Box 4157		·	Line 3 of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street			Part 2: Creditors with Nonpriority Unsecured Claims
Cananyua ad Millana		00455	Ganas
Greenwood Village	CO State	80155 ZIP Code	Last 4 digits of account number 7 4 3 5
e englantena programment progr	entiniero diprojero minute, estrata mperipri, espi-	enterior de manietario por compresse no mentro naturalita maderio decembro VII processo.	$0.004 \pm 0.004 \pm 0.00$
Sunrise Credit Services	s, ITIG.	***************************************	On which entry in Part 1 or Part 2 did you list the original creditor?
P.O. Box 9100			Line 3 of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street			Part 2: Creditors with Nonpriority Unsecured
WHITE ALL THE STREET ST			Claims
Farmington	NY	11735	Last 4 digits of account number 6 5 4 3
Dity stretismin min energy an arma property consequent a series of consequents.	State	ZIP Code	
Blitt and Gaines, P.C.			On which entry in Part 1 or Part 2 did you list the original creditor?
661 Glenn Avenue			Line 4 of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street			Part 2: Creditors with Nonpriority Unsecured
***************************************			Claims
Wheeling	<u>IL</u>	60090	Last 4 digits of account number 0 6 1 9
Lity g and the last of the angles of the last of the	State	ZIP Code	
Medicredit Inc.			On which entry in Part 1 or Part 2 did you list the original creditor?
PO Box 1629			Line 6 of (Check one): Depart 1: Creditors with Priority Unsecured Claims
lumber Street		······································	Line 6 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured
			Claims Claims
Maryland Heights	МО	63043	Last 4 digits of account number 2 8 3 4
Dity Description of the second production of t	State	ZIP Code	international continues reconstructions are assessed and assessed continues of the continue
Medicredit Inc.			On which entry in Part 1 or Part 2 did you list the original creditor?
^{ame} PO Box 1629			line 7 of (Check anal) D Dort to Condition with Date to Line 2
lumber Street		···	Line 7 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured
			Claims Part 2: Creditors with Nonpriority Unsecured
Maryland Heights	МО	63043	Last 4 digits of account number 2 8 3 4
ity La pod a translatini kana turitima turitima turitima kana kana kana kana kana kana kana ka	State	ZIP Code	LOST 7 GIGLS OF ACCOUNT BRINDER U U 7
Medicredit Inc.			On which entry in Part 1 or Part 2 did you list the original creditor?
ame			
PO Box 1629 umber Street	···	W	Line 9 of (Check one): Part 1: Creditors with Priority Unsecured Claims
			☑ Part 2: Creditors with Nonpriority Unsecured Claims
Maryland Heights	MO	63043	
ity	State	ZIP Code	Last 4 digits of account number 2 8 3 4

Debtor 1

Case 17-18308

MARQUARDIMENT

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Part 4:

ROSA MARIA

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Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

				Total claim
Total claims	6a	. Domestic support obligations	6a.	\$
from Part 1	6b	. Taxes and certain other debts you owe the government	6b.	\$
	6с	Claims for death or personal injury while you were intoxicated	6c.	\$
	6d	Other. Add all other priority unsecured claims. Write that amount here.	6d.	+ \$
	6e.	Total. Add lines 6a through 6d.	6e.	\$ 0.00
				Total claim
Total claims	6f.	Student loans	6f.	\$
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$
	6 h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6 i.	+ \$ 20,928.00
	6j. '	Total. Add lines 6f through 6i.	6j.	\$20,928.00

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ΙFΙ	ll in this ir	nformation to i	dentify your case:			
De	ebtor	ROSA	MARIA	MARQUARD	T	
		First Name	Middle Name	Last Name		
	ebtor 2 souse If filing)	First Name	Middle Name	Last Name		
Un	ited States	Bankruptcy Court	t for the: Northern District of Illinois	¥		
	se number					□ .
(11	knowп)	***************************************	·	·		Check if this is an amended filing
						J
Of	ficial F	orm 106	<u>6G</u>			
Sc	hedu	ule G: E	xecutory Contra	cts and	Unexpired Leases	12/15
infoi addi 1.	rmation. I itional pag Do you h	f more space in ges, write your ave any execu heck this box a	s needed, copy the additional par r name and case number (if know story contracts or unexpired leas and file this form with the court with	ge, fill it out, num /n). es? your other schedul	ether, both are equally responsible for su ber the entries, and attach it to this page. es. You have nothing else to report on this fo	On the top of any
	Yes. F	ill in all of the i	nformation below even if the contra	acts or leases are li	sted on Schedule A/B: Property (Official For	m 106A/B).
	List sepai example, unexpired	rent, vehicle i	rson or company with whom you lease, cell phone). See the instruc	I have the contractions for this form in	t or lease. Then state what each contract to the instruction booklet for more examples of	or lease is for (for of executory contracts and
				. **		
	Person o	r company wit	h whom you have the contract o	r lease	State what the contract or lease is	for
2.1						
.!	Name					
	Number	Street				
	City	× ×	State ZIP Code			the data and a state of the section of the action to the angle and space to the state of the section of the sec
2.2						
	Name		A.,	A A A A A A A A A A A A A A A A A A A		
	Number	Street	414444444444444444444444444444444444444			
	City		State ZIP Code			
2.3	.T.F.,		Comp Li Code	en e en e menetegelikelikelikelikelikelikelikelikelikelik	e de demande de commencia de la composição de la composição de la composição de desenvolves de la composição d	alian la Palamana de la masara la masara mala a mala da mala da la la masara da la masara da masara da masara d
	Name					
	Number	Street				
	Manipel	Ollect				
*****	City		State ZIP Code			en met met det kompleksen i henne ett maaten van de kompleksen propriet in gegen propriet in gegen.
2.4		·				
	Name					
	Number	Street				
	City		State ZIP Code			
2.5	and Today are	***************************************		entra an entra primeteria, esperante esperante esperante esperante esperante esperante esperante esperante esp	. Os este manifesta mentra este este este este este este este est	en artika deriker timakan dalam d
: .	Name					
i	Number	Street				
	City		State 7ID Code			

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Fill in	this information to id	entify your case:		
Debtor	1 ROSA	MARIA	MARQUARDT	
Dahtas	First Name	Middle Name	Last Name	
Debtor : (Spouse,	if filing) First Name	Middle Name	Last Name	
United 9	States Bankruptcy Court fo	or the: Northern District of Illinois	▼	
Case nu				
(If knowr	1)			☐ Check if this is a
				amended filing
Offici	al Form 106l	<u>-</u>		
Sch	edule H: Yo	our Codebtors		12/15
are filing and nun case nui	y together, both are enter the entries in the mber (if known). Answer (if known).	qually responsible for supply boxes on the left. Attach the	ing correct information. If Additional Page to this pa	as complete and accurate as possible. If two married peoper more space is needed, copy the Additional Page, fill it out age. On the top of any Additional Pages, write your name a make a codebtor.)
2			.,	
	Yes			
2. Witi	hin the last 8 years, h	ave you lived in a community	property state or territory	(Community property states and territories include
	ona, Calliomia, Idano, No. Go to line 3.	Louisiana, Nevada, New Mexic	o, Puerto Rico, Texas, Was	shington, and Wisconsin.)
		former spouse, or legal equival	ant live with you at the time	2
	No	tormer spouse, or legal equival	ent live with you at the time	!
		munity state or territory did you	live?	. Fill in the name and current address of that person.
		namy out on torritory and you		. I ill ill the hame and current address of that person.
	Name of your spouse, fo	ormer spouse, or legal equivalent	**************************************	-
	Number Street			_
	City	State	ZIP Code	-
sho Sch Sch	wn in line 2 again as edule D (Official Forn edule E/F, or Schedu	a codebtor only if that person n 106D), <i>Schedule E/F</i> (Officia le G to fill out Column 2.	is a guarantor or cosigne	r if your spouse is filing with you. List the person er. Make sure you have listed the creditor on ule G (Official Form 106G). Use Schedule D,
Co	lumn 1: Your codebto	r . ^{v . ·}		Column 2: The creditor to whom you owe the debt
				Check all schedules that apply:
3.1				Schedule D, line
Na	me			Schedule E/F, line
Nu	mber Street			Schedule G, line
Cit	u.	Out		
3.2		State State	ZIP Code	
	me			Schedule D, line
				☐ Schedule E/F, line
Nu	mber Street			☐ Schedule G, line
3.3	7	State	ZIP Code	
Na	me			Schedule D, line
1401	··· ·			Schedule E/F, line
Nu	mber Street			Schedule G, line
Cib		State	710 0-1-	

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F	ill in this in	formation to identify	your case:							
D	ebtor 1	ROSA		QUARDT						
D	ebtor 2	First Name	Middle Name La	ist Name						
•	Spouse, if filing)			ışt Name						
U	nited States E	Bankruptcy Court for the:	Northern District of Illinois	S						
	ase number If known)	The field that the second of the first the second of the first that the first the second of the first the					Check if			
				······································				mended filing oplement showing pos	stpetitio	n chapter 13
_								ne as of the following		
	fficial Fo		_				MM /	DD / YYYY		
S	ched	ule I: You	r Income							12/15
su if y se	pplying cor ou are sep- parate shee	rect information. If yo arated and your spou	essible. If two married peopou are married and not filing se is not filing with you, do top of any additional pages	jointly, and you not include info	ur sp orma	ouse is tion abo	living with ut your sp	you, include informati ouse. If more space is	on abou needed,	it your spouse. , attach a
1.	Fill in your informatio	employment n.		Debtor 1				Debtor 2 or non-		
	attach a se	more than one job, parate page with about additional	Employment status	☐ Employed ☑ Not employe	ed.		and the second s	☑ Employed☑ Not employed		
		t-time, seasonal, or								
		may include student	Occupation					Auto Mechanic		
	or nomema	ker, if it applies.	Employer's name		·	·····	**************************************	Bill Jacobs Napi	eville L	LC
			Employer's address	Number Street	***************************************			2495 Aurora Ave Number Street	3.	
			-	City	Stat	e ZIP C	ade	Naperville City	IL State	60504 ZIP Code
			How long employed there?	-	Stati	G 211 C	oue	•	JIBIC	Zii Oode
P	art 2:	Give Details About		7 5.5 years				5.5 years		
		nonthly income as of ess you are separated.	the date you file this form.	f you have nothin	ng to	report fo	any line, w	vrite \$0 in the space. Inc	lude you	r non-filing
	If you or you below. If yo	ur non-filing spouse ha u need more space, at	ve more than one employer, a tach a separate sheet to this	combine the infor form.	matic	on for all	employers t	for that person on the lir	ies	
	11-4	.		en all a ······························		For	Debtor 1	For Debtor 2 or non-filing spouse	e e e e e e e e e e e e e e e e e e e	
2.			ary, and commissions (before calculate what the monthly wa		2.	\$	0.00	\$ 5,099.00		
3.	Estimate a	and list monthly over	time pay.		3.	+\$		+ \$	-	
4.	Calculate	gross income. Add lir	ne 2 + line 3.		4.	\$	0.00	\$ 5,099.00		

Document

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Debtor 1

ROSA First Name

MARIA Middle Name

MARQUARDT

Case number (# known)_

			For De	ebtor 1	For De	btor 2 or ing spouse			
C	Copy line 4 here	→ 4.	\$		\$	5,099.00			
5. L	ist all payroll deductions:								
	5a. Tax, Medicare, and Social Security deductions	5a.	\$		\$	1,321.00			
	5b. Mandatory contributions for retirement plans	5b.			\$				
	5c. Voluntary contributions for retirement plans	5c.			\$	156.00			
	5d. Required repayments of retirement fund loans	5d.	\$	·	\$				
	5e. Insurance	5e.	\$		\$				
	5f. Domestic support obligations	5f.	\$						
;	5g. Union dues	5g.	\$		\$				
	5h. Other deductions. Specify:	5h.	+\$		+ \$				
6. 4	Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h	. 6.	\$	 	\$	1,477.00			
7.	Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	0.00	\$	3,622.00			
8. L	ist all other income regularly received:								
ŧ	Ba. Net income from rental property and from operating a business, profession, or farm								
	Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$		\$				
	8b. Interest and dividends	8b.	\$		\$				
1	Bc. Family support payments that you, a non-filing spouse, or a depende regularly receive	ent							
	Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$		\$				
	3d. Unemployment compensation	8d.	\$		\$				
i	Be. Social Security	8e.	\$		\$				
\$	Bf. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistar that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.	nce							
	Specify:	8f.	\$		\$				
8	Bg. Pension or retirement income	8g.	\$		\$				
8	3h. Other monthly income. Specify:	8h.	+\$		+\$				
	Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$	0.00	\$	0.00	j.e.	~~~	
	alculate monthly income. Add line 7 + line 9. dd the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$	0.00	\$	3,622.00	= \$;3	3,622.00
	tate all other regular contributions to the expenses that you list in Scheo								
fri	clude contributions from an unmarried partner, members of your household, yends or relatives.								
_	o not include any amounts already included in lines 2-10 or amounts that are pecify:	not av	ailable to p	pay expense	s listed in	Schedule J. 11. H	- \$		
	dd the amount in the last column of line 10 to the amount in line 11. The rite that amount on the Summary of Your Assets and Liabilities and Certain S					e. 12.	\$; 3	,622.00
				, к арр		I dias		ombin	ed / income
	o you expect an increase or decrease within the year after you file this f	orm?	······						
Į	Yes. Explain: Maybe a general cost of living raise								

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Fill	in this ir	nformation to identify	your case:				
Deb	itor 1	ROSA	MARIA MARQU	ARDT Check if t	nie ie:		
Deb	tor 2	First Name	Middle Name Lest Name	An am		lina	
(Spo	use, if filing		Middle Name Last Name	☐ A SUD		•	petition chapter 13
Unit	ed States	Bankruptcy Court for the:	Northern District of Illinois			the following	
	e number nown)			MM / C	D/ YYYY		
Off	icial I	Form 106J	<u>.</u>				
Sc	hec	lule J: Yo	ur Expenses				12/15
infor	mation. l	f more space is need nswer every question					
Part	¥1:	Describe Your Hou	usehold				
1. Is 1	this a joi	nt case?					
		to line 2. es Debtor 2 live in a	separate household?				
	-	No Yes. Debtor 2 must fil	le Official Form 106J-2, Expenses for S	Separate Household of Debtor 2.			
2. D o	you hav	ve dependents?	☐ No	Dependent's relationship to		Dependent's	Does dependent live
	not list E btor 2.	Debtor 1 and	Yes. Fill out this information for each dependent	Debtor 1 or Debtor 2		age	with you?
	not state mes.	e the dependents'		Daughter		2 years	☑ No ☑ Yes
				Son		4 mo.	☐ No ☑ Yes
							□ No
							Yes
							U No □ Yes
							☐ No
							Yes
ex	penses (penses include of people other than nd your dependents?	☑ No ☐ Yes				
Part	2: E	stimate Your Ongo	ing Monthly Expenses				
(0.000) (0.000) (0.000) (0.000)		_	r bankruptcy filing date unless you	are using this form as a supple	ment in	a Chapter 13 c	ase to report
-	nses as cable da		nkruptcy is filed. If this is a supplem	ental <i>Schedule J</i> , check the bo	ox at the	top of the form	n and fill in the
	-		n-cash government assistance if yo			Your expe	
			d it on Schedule I: Your Income (Off	•		i oui expe	end-talantian estatutation terretai estatut estatut estatut estatut estatut estatut estatut estatut estatut esta
		or the ground or lot.	expenses for your residence. Include	a nist mongage payments and	4.	\$	1,000.00
lf		uded in line 4:					
4		estate taxes			4a.		**************************************
4	-	erty, homeowner's, or i			4b.		
4			and upkeep expenses		4c.	\$	
4	d. Hom	eowner's association o	or condominium dues		4d.	\$	

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Debtor 1

ROSA

MARIA

MARQUARDT

Last Name

Case number (if known)_____

			Your expenses
		in the same of the	S
5.	Additional mortgage payments for your residence, such as home equity loans	5.	
6.	Utilities:		100.00
	6a. Electricity, heat, natural gas	6a.	\$ 120.00
	6b. Water, sewer, garbage collection	6b.	\$ 70.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$200.00
	6d. Other. Specify:	6d.	\$
7.	Food and housekeeping supplies	7.	\$800.00
8.	Childcare and children's education costs	8.	\$ <u>175.00</u>
9.	Clothing, laundry, and dry cleaning	9.	\$
10.	Personal care products and services	10.	\$160.00
11.	Medical and dental expenses	11.	\$
12.	Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12.	\$180.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$ 200.00
14.	Charitable contributions and religious donations	14.	\$100.00
15.	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.		
	15a. Life insurance	15a.	\$
	15b. Health insurance	15b.	\$
	15c. Vehicle insurance	15c.	\$ 90.00
	15d. Other insurance. Specify:	15d.	\$
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	\$
17.	Installment or lease payments:		
	17a. Car payments for Vehicle 1	17a.	\$
	17b. Car payments for Vehicle 2	17b.	\$
	17c. Other. Specify:	17c.	\$
	17d. Other. Specify:	17d.	\$
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$
19.	Other payments you make to support others who do not live with you.		
	Specify:	19.	\$
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom	ne.	
	20a. Mortgages on other property	20a.	\$
	20b. Real estate taxes	20b.	\$
	20c. Property, homeowner's, or renter's insurance	20c.	\$
	20d. Maintenance, repair, and upkeep expenses	20d.	\$
	20e. Homeowner's association or condominium dues	20e.	\$

Page 36 of 51 Document ROSA **MARIA MARQUARDT** Debtor 1 Case number (if known) Middle Name Other. Specify: Calculate your monthly expenses. 22a. Add lines 4 through 21. 22a. 3,539.00 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22b. 22c. Add line 22a and 22b. The result is your monthly expenses. 22c. 3,539.00 23. Calculate your monthly net income. 3,622.00 23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. 23b. Copy your monthly expenses from line 22c above. 3,539.00 23b. 23c. Subtract your monthly expenses from your monthly income. 83.00 The result is your monthly net income. 23c. 24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage? M No. Yes. Explain here:

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Doc 1

Filed 06/16/17

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this information to ide	ntify your case:				
r1 ROSA	MARIA	MARQUARD			
First Name	Middle Name	Last Name			
2 e, if filing) First Name	Middle Name	Last Name			
States Bankruptcy Court fo	r the: Northern District of I	lllinois 🔻			
number wn)					
					Check if this amended fil
·	0 D				
ficial Form 10		Individual	Debtor's S	chadulas	12
- Clarativii	AUUUL an	HWIVICE	DCD(UI 3 G	Circuaics	14
vo married people are f	iling together, both are	equally responsible for	supplying correct inform	nation.	
	rty by fraud in connections		ise can result in fines up	to \$250,000, or anprisorance	nt for up to
Sign Below Did you pay or agree to	§ 152, 1341, 1519, and 3	571.	you fill out bankruptcy f	orms? tion Preparer's Notice, Declaration	**************************************
Sign Below Did you pay or agree to No Yes. Name of person	§ 152, 1341, 1519, and 3 o pay someone who is N	IOT an attorney to help	you fill out bankruptcy f Attach Bankruptcy Peti Signature (Official Form	orms? tion Preparer's Notice, Declaration n 119).	**************************************
Sign Below Did you pay or agree to No Yes. Name of person	§ 152, 1341, 1519, and 3 o pay someone who is N DAVID C. SZERLAC	IOT an attorney to help	you fill out bankruptcy f	orms? tion Preparer's Notice, Declaration n 119).	**************************************
Sign Below Did you pay or agree to No Yes. Name of person	§ 152, 1341, 1519, and 3 o pay someone who is N DAVID C. SZERLAC	FOT an attorney to help Great the summary and s	you fill out bankruptcy f Attach Bankruptcy Peti Signature (Official Form	orms? tion Preparer's Notice, Declaration n 119).	**************************************

Date MM / DD / YYYY

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Debtor 1	nis information to ide					
	ROSA First Name	MARIA Middle Name	MARQU Last Name	ARDT		
ebtor 2 pouse, if	filling) First Name	Middle Name	Last Name			
ited St	ates Bankruptcy Court for	the: Northern District o	f Illinois	-		
se nun known)						-
						☐ Check if this is amended filing
ficia	al Form 107					
ate	ment of Fin	ancial Affai	rs for Indiv	iduals Filing for	Rankrunte	V 04
				g together, both are equally res		_
rmatic	on. If more space is r f known). Answer eve	ieeded, attach a sepai	ate sheet to this fo	m. On the top of any additiona	sponsible for supply I pages, write your i	name and case
1001 (I	m	ay question.				
art 1:	Give Details Abo	out Your Marital Sta	atus and Where Y	ou Lived Before		
What	is your current marit	al ctatus?				
	larried	ai status :				
	larried ot married					
		s you lived in the last 3	years. Do not include Dates Debtor 1 lived there	where you live now. Debtor 2:		Dates Debtor 2
			arou incio			lived there
				Same as Debtor 1		Same as Debto
-	Number Street		From	Number Street		From
			10			То
			_			
	City	State ZIP Code	_	City S	tate ZIP Code	
				☐ Same as Debtor 1		Same as Debtor
	Number Street		From			From
	Trumbol Deset		To	Number Street		То
			-			
			_	City S		
-	City	State ZIP Code			DEFE APPLIAGE	
-	•				tate ZIP Code	
- (Within	the last 8 years, did	vou ever live with a si	oouse or legal equiv	alent in a community property	atata an tamitam 2 (Community property
Within states	the last 8 years, did and territories include	you ever live with a sj Arizona, California, Ida	no, Louisiana, Nevad	ralent in a community property a, New Mexico, Puerto Rico, Tex	atata an tamitam 2 (Community property Wisconsin.)
Within states	the last 8 years, did and territories include	vou ever live with a si	no, Louisiana, Nevad	ralent in a community property a, New Mexico, Puerto Rico, Tex	atata an tamitam 2 (Community property Wisconsin.)

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Debtor 1	ROSA First Name		MARQUARDT st Name	Case n	umber (if known)	
Fill If y	I in the total amor	unt of income you receiv int case and you have in	ent or from operating a be ed from all jobs and all bus come that you receive toge	inesses, including part-t	er or the two previous cale ime activities. der Debtor 1.	endar years?
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		1 of current year until iled for bankruptcy:	Wages, commissions, bonuses, tips Operating a business	\$	Wages, commissions, bonuses, tips Operating a business	\$
	For last calend	dar year: December 31,2015	Wages, commissions, bonuses, tips Operating a business	\$	☐ Wages, commissions, bonuses, tips ☐ Operating a business	\$
		lar year before that:	Wages, commissions, bonuses, tips Operating a business	\$12,853.00	☐ Wages, commissions, bonuses, tips☐ Operating a business	\$
Inclune gan List	lude income rega employment, and mbling and lottery	ardless of whether that in other public benefit pay winnings. If you are filing the gross income from	ments; pensions; rental inc	of other income are alirome; interest; dividends; e income that you receive	nony; child support; Social i money collected from laws ed together, list it only once t you listed in line 4.	uits; royalties; and
			Debtor 1		Debtor 2	
			Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)
	From January the date you fi	1 of current year until iled for bankruptcy:		\$ \$ \$		\$\$ \$\$
	For last calend	dar year: ecember 31,2015	Unemployment	\$		\$ \$ \$
		ar year before that: ecember 31,2014 / YYYY	11	\$ \$390.00		\$ \$

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ROSA MARIA MARQUARDT Debtor 1 Case number (if known)_ First Name Middle Name Part 3: List Certain Payments You Made Before You Filed for Bankruptcy 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of Total amount paid Amount you still owe Was this payment for... payment ☐ Mortgage Creditor's Name ☐ Car Number Street Credit card Loan repayment ☐ Suppliers or vendors City State Other_ ZIP Code ☐ Mortgage Creditor's Name Car Number Street Credit card Loan repayment Suppliers or vendors Other____

City

City

Creditor's Name

Number Street

State

State

ZIP Code

ZIP Code

☐ Mortgage

Other

Loan repayment Suppliers or vendors

Car Credit card Case 17-18308 Doc 1 Filed 06/16/17 Entered 06/16/17 12:06:16 Desc Main Document Page 41 of 51

or 1	ROSA First Name	MARIA Middle Name	MARQU Last Name	ARDT	urran.	Case number (# know	71)	
nside corpo agent	rations of which, including one	ir relatives; any g ch you are an offi	jenerai partners; cer, director, pei	relatives of any rson in control	general partners; or owner of 20% o	partnerships of whi	who was an insider? ch you are a general par g securities; and any man or domestic support oblig	
ZINO		et and amnony.						
		ments to an insid	er.					
				Dates of payment	Total amount paid	Amount you still owe	Reason for this paymer	t
Ī	nsider's Name				\$	\$		
ī	Number Street							
-								
ā	City	Sta	te ZIP Code	_				
					\$	\$		
În	nsider's Name				9	D		
N	umber Street							
Ci	ity	Stat	e ZIP Code	-				
clude No	payments on	you filed for ba debts guarantee ents that benefit	d or cosigned by		Total amount		n account of a debt that Reason for this payment Include creditor's name	t benefited
ins	sider's Name				\$	\$		
	and a Hame					***************************************		
Nu	mber Street							
	<u> </u>							
City	у	State	ZIP Code					
					\$	¢		
Insi	ider's Name				Ψ	\$		
Nur	mber Street							
City	·	State	ZIP Code					

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			Document	Page 42 of 51	
or 1	ROSA First Name	MARIA Middle Name	MARQUARDT Last Name	Case number (# known)	
rt 4: Withi			Repossessions, and Fore	closures n any lawsuit, court action, or administrative p	
ust a	ll such matters ontract dispute	s, including persor	ank upicy, were you a party all injury cases, small claims a	ctions, divorces, collection suits, paternity actions,	roceeding? support or custody modifica
1 N					
I Y€	es. Fill in the d	etails.	Nature of the case	Court or agency	Status of the cas
c	case title		- And Annual Marketine	Court Name	Pending
_			THE THE PARTY AND ADDRESS OF THE PARTY AND ADD		On appeal
_	S			Number Street	Concluded
•	ase number			City State ZIP Code	
С	ase title			Court Name	Pending
***					On appeal
~	aca numbor			Number Street	☐ Concluded
C	ase number		A-A-y-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-	City State ZIP Code	
Zneck Mo	. Go to line 1	and fill in the deta	nkruptcy, was any of your poils below.	operty repossessed, foreclosed, garnished, att	tached, seized, or levied?
			Describe the	property Date	Value of the propert
	Creditor's Name	е		:	\$
	Number Stre	.			
	inumber alle	PE-4	Explain wha	••	
	·			y was repossessed. y was foreclosed.	
				y was garnished.	
	City	State		y was attached, seized, or levied.	

Creditor's Name

Number Street

City

Property was repossessed.Property was foreclosed.Property was gamished.

Property was attached, seized, or levied.

Describe the property

Explain what happened

ZIP Code

Value of the property

Date

Case 17-18308 Doc 1 Filed 06/16/17 Entered 06/16/17 12:06:16 Desc Main Document Page 43 of 51 **ROSA** MARIA

MARQUARDT

Nithin 90 days before you filed for	bankruptcy, did any craditor incl.	uding a bank or financial institution, set off a	
	nent because you owed a debt?	runing a pank or financial institution, set off a	iny amounts from yo
1 No			
Yes. Fill in the details.			
	Describe the action the cree	ditor took Date action	Amount
Creditor's Name		was taken	
Number Street			\$

	-		
City State ZIP	Code Last 4 digits of account nur	mber: XXXX	
		y in the possession of an assignee for the be	
No Yes	r, a custodian, or another official?		
1 ত ঙ			
List Certain Gifts and Co.			
List Certain Gifts and Cor	ntributions		
Gifts with a total value of more than to per person	\$600 Describe the gifts	Dates you ga the gifts	ve Value
	'	•	* 1
	·		**
Person to Whom You Gave the Gift			\$
² erson to Whom You Gave the Gift			\$
^o erson to Whom You Gave the Gift			\$ \$
			\$
		***************************************	\$ \$
umber Street	orie -		\$\$
umber Street ity State ZIP Co	ode		\$\$
umber Street ity State ZIP Co	Mary damentalism.		\$\$
lumber Street ity State ZIP Co erson's relationship to you			\$\$
iumber Street ity State ZIP Co erson's relationship to you ifts with a total value of more than \$60			\$
iumber Street ity State ZIP Co erson's relationship to you ifts with a total value of more than \$60			\$
ity State ZIP Co erson's relationship to you ifts with a total value of more than \$60 er person		Dates you gave	\$
ity State ZIP Co erson's relationship to you ifts with a total value of more than \$60 er person		Dates you gave	\$
iumber Street State ZIP Co erson's relationship to you ifts with a total value of more than \$60 er person		Dates you gave	\$
lumber Street State ZIP Co erson's relationship to you ifts with a total value of more than \$60 er person		Dates you gave	\$
lumber Street State ZIP Co erson's relationship to you ifts with a total value of more than \$60 er person		Dates you gave	\$
ity State ZIP Co erson's relationship to you ifts with a total value of more than \$60 er person		Dates you gave	\$\$
lumber Street State ZIP Corresponds relationship to you ifts with a total value of more than \$60 ar person erson to Whom You Gave the Gift		Dates you gave	\$\$
Person's relationship to you Sifts with a total value of more than \$60 person erson to Whom You Gave the Gift	Describe the gifts	Dates you gave	\$
Number Street Sity State ZIP Corporation St	Describe the gifts	Dates you gave	\$\$

Debtor 1

Case 17-18308 Doc 1 Filed 06/16/17 Entered 06/16/17 12:06:16 Desc Main Page 44 of 51 Document ROSA MARIA Debtor 1 **MARQUARDT** Case number (if known First Name 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? ☑ No Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities Describe what you contributed that total more than \$600 Date you Value contributed Charity's Name Number Street City State ZIP Code Part 6: **List Certain Losses** 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? ☑ No Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss how the loss occurred Date of your Value of property Include the amount that insurance has paid. List pending insurance loss claims on line 33 of Schedule A/B: Property. Part 7: **List Certain Payments or Transfers** 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. **☑** No Yes. Fill in the details. Description and value of any property transferred Date payment or Amount of payment transfer was Person Who Was Paid made Number Street City ZIP Code Email or website address

Person Who Made the Payment, if Not You

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		Middle Name	l	ast Name	Case number	for errosess)		
Acces			ata atau antara da a	Description and value of any	r property transferred		Date payment or transfer was made	Amount of payment
	Person Who Was F	² aid						
								\$
	Number Street							
	***************************************							\$
	City	State	ZIP Code					
		3.2.13						
Ī	Email or website ad	dress						
				_				
- 1	Person Who Made I	the Payment, if I	Not You					
Y	es. Fill in the de	etails.		Description and value of any	property transferred		Date payment or	Amount of pa
					property authorities		transfer was	Autouit of pay
i	Person Who Was P	aid			er er er van Australië in de eerste van d De eerste van de		mac	
i	Number Street		***************************************	·			MT1000000000000000000000000000000000000	\$
i	Number Street						**************************************	\$
	Number Street	State	ZIP Code				******************	\$
	City				herwise transfer any pr	operty to	anyone, other tha	\$
thi nsi	City n 2 years befo ferred in the o	re you filed rdinary cou	for bankr	uptcy, did you sell, trade, or ot	?			
thii insi ilud	City n 2 years befo ferred in the o de both outright of include gifts a	re you filed rdinary cou transfers ar	for bankrourse of you	uptcy, did you sell, trade, or ot r business or financial affairs? made as security (such as the g ave already listed on this statem	? granting of a security inter			
thinnsi Iud no No	City n 2 years befo ferred in the o de both outright of include gifts a	re you filed rdinary cou transfers ar and transfers	for bankrourse of you	r business or financial affairs? made as security (such as the o	? granting of a security inter			
thin nst lud no No	City n 2 years befo ferred in the o de both outright of include gifts a	re you filed rdinary cou transfers ar and transfers	for bankrourse of you	r business or financial affairs? made as security (such as the g ave already listed on this statem	? granting of a security inter ent.			
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thin nst lud no No Ye	City n 2 years befo ferred in the o de both outright of include gifts a	re you filed ordinary cou transfers ar and transfers etails.	for bankrourse of you	r business or financial affairs? made as security (such as the gave already listed on this statem Description and value of prop	granting of a security inter lent. Describe any production or debts paid in	est or mo est or mo esty or eschang	rtgage on your prop	perty). Date trans
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Debtor 1	ROSA First Name	MARIA Middle Name	MARQUARDT Last Name	Case number (if lon	own)	All A.
19. With are	a beneficiary?	fore you filed for (These are often o	bankruptcy, did you transfer any pro called asset-protection devices.)	perty to a self-settled tru	st or similar device of	which you
	Yes. Fill in the d	etails.				
			Description and value of the pr	operty transferred		Date transfer was made
i	Name of trust	Parks by				
^			Andrew Control of the			
Part 8	List Certain		counts, instruments, Safe Depo			error agramme denotembre Nestigning of August, and the second standard with Nestignin's
clos Incli brok	ed, sold, move ude checking, s cerage houses,	d, or transferred avings, money r pension funds, o	inkruptcy, were any financial account? narket, or other financial accounts; c cooperatives, associations, and other	ertificates of deposit; sha		
			Last 4 digits of account numbe	r Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
	Name of Financial I	nstitution		Checking	***	\$
	Number Street	,		Savings		
		**	1	Money market		
	City	State ZIP (ode	☐ Brokerage ☐ Other		
	Name of Financial I	nstitution	xxxx	Checking		\$
	Number Street		*****	Savings Money market		
				☐ Brokerage		
				Other		
	City	State ZIP C				
secu Marin	rities, cash, or	other valuables?	ithin 1 year before you filed for bankr	uptcy, any safe deposit t	oox or other depository	/ for
			Who else had access to it?	Describe the	contents	Do you still have it?
i	Name of Financial In	stitution	Name			☐ No ☐ Yes
Ĭ	Number Street		Number Street	1 Annie de la constante de la		
-	CH.	State 7ID C	City State ZIP Code			

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	First Name	Middle Name		ARQUARDT		Cas	se number (if known)		
2.Have yı 2.No	ou stored prop	erty in a s	torage uni	t or place other tha	an your home	within 1 year	before you filed fo	r bankrupte	cy?
	s. Fill in the det	ails.							
				Who else has or	had access to	t?	Describe the conter	nts	Do you have it
Ne	ame of Storage Faci	lity		Name					□ No
NL	umber Street			Number Street					- 10
******				CityState ZIP Code					
Cit	ty	State	ZIP Code						
Part 9:									
				or Control for S					
3. Do you	i hold or contro I in trust for soi	l any prop	perty that s	omeone else own	s? Include an	/ property yo	u borrowed from, a	re storing i	ог,
₩ No		meone.						· ·	•
Yes Yes	s. Fill in the deta	ails.							
				Where is the prope	erty?		Describe the propert	y	Value
									10,00
Ow.	vner's Name								\$
Nun	mber Street			Number Street					` '''
									
City				City	State	TR Code			
City	M		ZIP Code	•		IP Code			
	M			City cental Information		IP Code			
art 10: or the pur	Give Detail	s About	Environm	ental Informati	on				
art 10: or the pur <i>Environi</i> hazardo	Give Detail rpose of Part 10 mental law mea	s About the folloans any fe	Environmount of the control of the c	itions apply:	on	oncerning po	ollution, contamina r, groundwater, or c	tion, releas	ses of um,
art 10: or the pur Environi hazardo includin	Give Detail rpose of Part 10 mental law mea pus or toxic sub- g statutes or re- ans any location	s About the follous any ferstances, segulations facility.	ewing defined ederal, state wastes, or scontrolling	itions apply: a, or local statute of material into the a g the cleanup of the cast defined under the statute of the cast defined under the statute of the s	on or regulation of ir, land, soil, s nese substance	concerning posurface water		ther mediu	ım,
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State

ZIP Code

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		MARIA liddle Name	MARQUARDT Last Name	***	Case number	(if known)		
	ified any g	jovernmental i	unit of any release of hazard	tous material?				
☑ No								
Yes. Fill in	n the deta	ils.						
			Governmental unit	E	invironmental law	, if you know it		Date of notice
Name of si	te		Governmental unit					:
Number :	Street		Number Street					
			City State	ZIP Code				
City		State ZIP Co	ode .					
ave you bee	n a party i	n any judicial	or administrative proceedin	g under any er	vironmental la	w? Include settle	ments and o	rders.
Ño								
🕽 Yes. Fill ir	n the detai	ls.						
			Court or agency		Nature of the	case		Status of the
Case title								case
Case title			Court Name					Pending
								On appea
			Number Street	*****				Conclude
Case numb	er							
			City S	itate ZIP Code				
1ili Giv	o Dotaile	About You	r Business or Connection				•	
Males and the second desired.				-				
A sole	oronrieto:	on ned for par r or self-emolo	nkruptcy, did you own a bus oyed in a trade, profession, o	iness or have	any of the follow	wing connections	to any busi	ness?
☐ A mem	ber of a li	mited liability	company (LLC) or limited lia	or other activity	y, eitner full-tim bio (LLD)	e or part-time		
☐ A partr	ner in a pa	mica nabinty	company (rrc) of initiated its	many parmers	nip (LLP)			
		rtnershin						
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An offic		rtnership or, or managir	ng executive of a corporatio		_			
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Debtor 1	KUSA	MARIA	MARQUARDT	. .
	First Name	Middle Name	Last Name	Case number (if known)
			Janaharana Kalabaharan	
			Describe the nature of the busin	
	Business Name			Do not include Social Security number or ITIN.
				Ein:
	Number Street			Annual Control of the
			Name of accountant or bookkee	per Dates business existed
			•	
	City	State ZIP	Code	From To
	وينا في الروادية والمواردة والمواردة والمستوانية والمواردة والموار	ale de actività de la companya de l	- Charles and the Control of the Con	the street of the control of the con
□ N		•	eankruptcy, did you give a financial statiles.	ement to anyone about your business? Include all financial
	wi the de	wila velOW.		
			Date issued	
N	lame		MM / DD / YYYY	
Ñ	umber Street			
-				
Ci	ity	State ZIP C	ode	
	•			
rt 12:	Sign Below			
	aran perop			
I have	read the answ	are on this Ct-		
алѕw	ers are true and	correct. I unde	ement of Financial Affairs and any attac erstand that making a false et temper.	chments, and I declare under penalty of perjury that the oncealing property, or obtaining money or property by fraud
in con	nection with a	bankruptov cas	ie can recult in fines up to the can	oncealing property, or obtaining money or property by fraud imprisonment for up to 20 years, or both.
10 0.3	i.C. §§ 152, 134	า, 1519, and 35	71.	the second secon
1 T	Jierr	m	Social No.	
1 - 1	1000	11 paris	Nurqueros	
Sig	nature of Debtor	1	Signature of Debto	er 2
	08/45/2047			
	06/15/2017		Date	
Did you	u attach additio	nal pages to Y	our Statement of Financial Affaire to -	dividuals Filing for Bankruptcy (Official Form 107)?
M No		-	The second secon	orviouals riling for Bankruptcy (Official Form 107)?
∟ Ye	5			
Did you	Pay or agree t	O Dav someone	Who is not an attached to	
☐ No	. ,g.vo t	- has animonif	who is not an attorney to help you fill o	out bankruptcy forms?
	. Name of perso	DAVID C S	ZERI AG	
103	. Herne of perso	11	4LINLAU	Attach the Bankruptcy Petition Preparer's Notice,
				Declaration, and Signature (Official Form 119).

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Fill in this inf	formation to	identify your case:		
Debtor 1	ROSA First Name	MARIA Middle Name	MARQL Last Name	JARDT
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	
United States B	Bankruptcy Cou	rt for the: Northern District of Illinois		v
Case number (If known)				

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Partials List Y

List Your Creditors Who Have Secured Claims

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C	
Creditor's	☐ Surrender the property.	☐ No	
name:	Retain the property and redeem it.	Yes	
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.		
	Retain the property and [explain]:		
Creditor's	☐ Surrender the property.	□ No	
name:	Retain the property and redeem it.	☐ Yes	
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.		
	Retain the property and [explain]:		
Creditor's	☐ Surrender the property.	□ No	
name:	Retain the property and redeem it.	Yes	
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.		
ooding door.	Retain the property and [explain]:		
Creditor's	☐ Surrender the property.	□ No	
name:	Retain the property and redeem it.	Yes	
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.		
	Retain the property and [explain]:		

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Debtor 1

ROSA First Name

MARIA Middle Name

MARQUARDT

Case number (#known)_

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List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106	iG),
fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not y	et
ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).	

.essor's name:		☐ No
Description of leased roperty:		Yes
essor's name:		□ No
escription of leased roperty:		Yes
essor's name:		□ No
escription of leased roperty:		Yes
essor's name:		□ No
escription of leased roperty:		····· Yes
essor's name:		□ No
escription of leased roperty:		Yes
essor's name:		□ No
escription of leased roperty:		☐ Yes
essor's name:		□ No
escription of leased operty:		Yes
учет отнова задажений под од бого под под се под под се под под се под под се под се под се под се под се под с		
Sign Below		
der penalty of perjury, sonal property that is :	I declare that I have indicated my intention about any property of my subject to an unexpired lease.	estate that secures a debt and any
Resso mai		
てつひてんき ししんぎし	XX, 11 COURTON P.	
gnature of Debtor 1	Signature of Debtor 2	